



Town of Carrboro Community Event Pre-Application

Please provide the following information to assist staff with evaluating what types of approvals may be needed for your event. Submission of this application is not an approval of the event.

Event Organizer Information

Name of Organization: Not So Normal Fund, Inc.

Organization: ☒ Nonprofit
(Check appropriate box)

☐ For-Profit

☐ Other:

Website: www.notsonormalrun.org

Organization Primary Contact Name (first, last name): Jay Radford

Mailing Address: 109 Eagle Rock Ct

City: Chapel Hill

State: NC

zip: 27516

Phone(919) 370-7828

Fax: ()

Email: jay@notsonormalrun.org

Event Information

Name of Event: Not So Normal Run Weekend

Preferred Date: April 15, 2018

Event time: 7:30am – 1:30pm

Set-up time: 4:00am

Clean-up time: 2:00 – 4:00pm

Other Possible Dates (if the above date is not available):

Rain Date: none

Expected Attendance: 1,000 runners total

Type of Event (check all that apply):

☐ **Public Event on Private Property**

Location:

☒ **Public Event on Public Property** - Including (check all that applies):

☒ Town Commons

☐ Century Center

☐ Park or Facility (be specific):

☒ **Street Event** -Public Street or Right-Of-Way-(list street(s):

☐ Other site(s):

☐ **Other** (Please explain):

Event Details

Does your event include any of the following?

Activity

Sell and/or consumption of Alcohol

Sell and/or consumption of Food

Sell of crafts or goods

Street or lane closures

Police/Public Safety/Security

Temporary shelters, tents, staging or other structures

Open Flames or Pyrothenics

Town staffing, resources, or equipment*

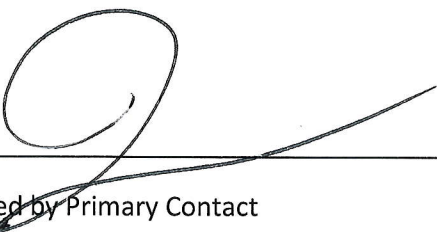
Yes	No
X	
X	
X	
X	
X	
X	
	X
X	

*please be advised that some events may require reimbursement for town related expenses

Event Description

Please provide a general description and purpose of your event. Attach a simple diagram of event area with details of staging, fencing, booths, tents, walkways, entryway/exits, emergency response plan, etc. Providing this information will assist town staff in helping you to plan a successful event. Thank you!

Narrative is attached.



Signed by Primary Contact

4/3/17

Date

Submit this application to Carrboro Recreation and Parks office at 100 N. Greensboro Street, or fax to (919)918-4475 or email to Dianah Alston-Sanders – dsanders@townofcarrboro.org